
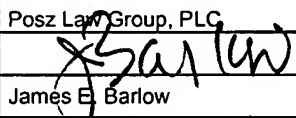



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 <p>TRANSMITTAL FORM</p> <p><small>(Not valid for all correspondence after initial filing)</small></p>	Application Number	10/771,468
	Filing Date	2/5/2004
	First Named Inventor	MATSUHASHI
	Art Unit	3683
	Examiner Name	Sy
Total Number of Pages in This Submission	Attorney Docket Number	14-027

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Drawing (replacement sheet showing Fig. 5) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance communication to (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
<div style="border: 1px solid black; padding: 2px;">Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Posz Law Group, PLC		
Signature			
Printed name	James E. Barlow		
Date	1 August 2007	Reg. No.	32,377

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Signature			
Typed or printed name	Nicole Hanna	Date	1 August 2007



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: MATSUHASHI

Serial No.: 10/771,468

Filed: 2/5/2004

Title: STROKE SIMULATOR

Atty. Dkt.: 14-027

Art Unit: 3683

Examiner: Sy

Mail Stop Amendment

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Date: 1 August 2007

CERTIFICATE OF MAILING

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Typed Name: Nicole Hanna

Signature: Nicole Hanna

AMENDMENT UNDER 37 CFR 1.111

Sir:

In response to the office action mailed 1 May 2007, please amend the application as follows:

Amendments to the Specification begin on page 2 of this paper.

Amendments to the Claims are reflected in the listing of claims that begins on page 3 of this paper.

Amendments to the Drawings begin on page 9 of this paper and include an attached replacement sheet.

Remarks begin on page 10 of this paper.